Program Activity

Blitz 29

This form should reflect the overtime work recorded on the Personal Services form.

County:				
* November 18, 2001 thru		Department:		
December 1, 2001 *		Grant #:		
		Written		
Violation	Citations	Warnings	TOTAL	1
Safety belt				-
Child restraint				4
Speed related	}			4
Open container	}			
Minor alcohol	<u> </u>			number of seat belt
Misdemeanor DUI	 			enforcement zones
Felony DUI	<u> </u>			conducted:
Other alcohol	<u> </u>			ļ <u>L</u>
License suspended				
Graduated license				
Other license violation				
Criminal misdemeanor				
Criminal felony				
Other traffic	<u> </u>			
Total				
Hours Worked				
0601 - 1200			Physical arrest	hours
1201 - 1800			(Actual time you're	with a person suspected of DUI)
1801 - 2400				
0001 - 0600			Actual Patrol H	lours
Administrative hours			(Total hours minus a	admin and arrest hours)
Total hours				
		_		
Contacts per hour				1
(total contacts divided by actual patrol hours)			(required is 3.0)	1
(total contacts divided by actual p	all of Hours)		(required is 5.0)	
Seat belt and child restra	int citations pe	r hour		1
			(required is 1.5)	•
				_
DUI arrests per 8 hours				
(actual patrol hours divided by 8;			(required is 1.0)	_
then total DUI arrests divided by	that number)			

Project Director